		PATENT A	RD	09716/0 /											
	•	CLAIMS AS FILED - PART I (Column 1) (Column 2)							SMALL ENTITY TYPE				OTHER THAN		
	TOTAL CLAIMS								RAT	E	FEE	1	RATE	FEE	
	FO	R	NUMBER FILED N			ER EXTRA		BASIC	FEE	355.00	OR	Basic Fee	710.00		
	TOTAL CHARGEABLE CLAIMS			~ minus 20= ° <					X\$ 9	=		OR	X\$18=		
	INDEPENDENT CLAIMS			/ minus 3 = 3				X4		_		OR	X80=		
	MULTIPLE DEPENDENT CLAIM P			RESENT			+135=					+270=			
7.	· H	the difference	in column 1 is	less than zero, entor "O" in column 2				TOTAL				OR OR	TOTAL		
			CLAIMS AS AMENDED - PART II						101	a.		OK	OTHER	THAN	
		(Column 1) (Column 2) (Column 3)								LLE	NTITY	OR	SMALL		
	ENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RAT	Ε	ADDI- TIONAL FEE		RATE	ADDI- TIONAL PEE	
	OM O	Total	. 2	Minus	. 2	D	= /	1	X\$ 9	<u>.</u>		OR	X\$19≤		
	AMENDM	Independent	•	Minus	***	3_	= /		X40:	-	•	OR	X80=		
	L	FIRST PRESE	NTATION OF M	JLTIPLE DEF	ENDENT	ČLAIM	<u> </u>	J	+135				+270=		
		117	·							TAL		OR	· TOTAL		
		2/4/08	(Column 1)		(Column 2) (Column 3)				ADDIT. F	EE		OR _.	ADDIT. FEE		
	8		CLAIMS REMAINING		HIGH	ST	PRESENT	וו		7	ADDI-			ADDI-	
.	EN		AFTER AMENDMENT		PREVIO PAID F	USLY	EXTRA		RAT	E	TIONAL FEE		RATE	TIONAL FEE	
	ENDW	Total	· 7	Minus	. 21	2			X\$ 9	=		OR	X\$18=		
	AME	Independent	• / NTATION OF MI	Minus	••• <u>3</u>	C 0134		-	X40	2	,	OR	X80=		
	L	THINST PHESE	NIATION OF AN	OLITE DEF	SNOSAI	CLAIM		J	+135	ii		OR	+270=		
	١,	×///						1	· TO			OR	TOTAL		
		7//0% (Column 1) (Column 2) (Column 3								'tt I			ADDIT. FEE		
	Ö		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO PAID I	EST BER USLY	PRESENT EXȚRA		RATI	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	MO	Total	. 2	Minus	22	,	. —		X\$ 9	_		OR	X\$18=		
	AMENDMENT	Independent	• /	Minus	3	>	- /	1	X40:	┥			X80=		
	<u> </u>	FIRST PRESE	NTATION OF M	ULTIPLE DE	PENDENT	CLAIM]		-		OR			
		If the enter in selec	ma 1 is less than 4	he entry in mile	ma 2 write	T in co	tumo 3.		+135	= AL		OR	+270=		
		If the entry in column 1 is less then the entry in column 2, write "0" in column 3. "If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "2" ""If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."											ADDIT. FEE	<u> </u>	
	l	The Highest Nur	ber Previously Pa	id For (Total o	r Independe	ni) is the	highest numb	er fo	and in the	e abt	ropriate bo	x in co	lumn 1.		

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